

Please Print Clearly

MAIL TO: Narragansett Town Hall, 25 Fifth Avenue, Narragansett, RI 02882

Application for a Certified Copy of a Birth Record

Please complete ALL items 1-5 below:

1. Fill in the information below for the person whose birth record you are requesting:

Full name at birth _____ Age now _____
New name if changed in court (excluding marriage) _____
Date of birth _____ City/town of birth _____ Hospital _____
Mother's full maiden name _____
Father's full name _____

2. I am applying for the birth record of (complete one of the following):

- ☐ myself ☐ my child ☐ my mother/father
☐ my grandchild (parent of mother) ☐ my grandchild (parent of father) ☐ my brother/sister
☐ my client -- I'm a social worker. Name of my agency is _____
☐ my client -- I'm an attorney representing: _____
The name of the law firm is: _____
☐ another person (specify your relationship): _____

3. Why do you need this record? (We ask this question so that we can supply you with a certified copy that will be suitable for your needs.)

- ☐ school ☐ license ☐ vets benefits ☐ social security ☐ passport/travel ☐ foreign govt
☐ work ☐ WIC ☐ welfare ☐ other use (specify) _____

4. **Copies cost \$20.00. Any additional copies of this record purchased this same day cost \$15.00 each.**

How many copies do you want? _____ (Payable to: **Town of Narragansett**)

5. I hereby state that the information supplied in item #2 above is true and that I am not in violation of Section 23-3-28 of the General Laws of RI (printed on the reverse side of this form).

Please sign _____
Signature of person completing this form date signed

Print your name _____ () _____
phone #

Print your address _____
street or mailing address city/town state zip code

ATTACH PHOTOCOPY OF VALID GOVERNMENT ISSUED PICTURE ID

What is required to obtain vital records?

To obtain a certified copy of a birth, death, or marriage record you will be expected to present an acceptable picture identification. An acceptable picture identification is defined as one issued by a governmental organization.

These identifications will most likely fall into one of the following types:

Driver's License
Passport
Military Identification
Certificate of naturalization
Alien Registration Card

If making the request in person, the applicant must present an original of the above stated forms of identification. If the request is made by mail, a readable copy of one of the above forms of identification is required. The copy will not be returned to you. If the application or request is received without the above stated identification, the request will not be processed and it will be returned to you.

To receive a certified copy of a birth, death, or marriage record via mail and not using the website application you must provide the following information:

- the name on the birth, death, or marriage record,
- the date and city/town where the event occurred,
- your relationship to the person named on the record,
- why you need the record,
- for births only, provide the name of the father and the mother's maiden name,
- your signature and printed name,
- your mailing address and your home phone number in case we need to contact you.

Section 23-3-28 of the General Laws

I understand that Section 23-3-28 of the General Laws of Rhode Island provides penalties for either of the following violations: Any person who willfully and knowingly makes any false statement in a report, record, certificate or application for an amendment thereof, or who willfully and knowingly supplies false information intending that such information be used in the preparation of any of the such report, record, or certificate, or amendment thereof...shall be punished (if convicted) by a fine of not more than one thousand (\$1,000) dollars or imprisoned not more than one (1) year or both.